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**PATENT APPLICATION**

Attorney Docket No.: 108738

**AMENDMENT TRANSMITTAL**

In re the Application of

William J. RAFFERTY et al.

Application No.: 09/961,066

Group Art Unit: 3752

Filed: September 24, 2001

Examiner: Thach H. Bui

For: MEDIA DISCHARGE DEVICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

**RECEIVED**

JUN 16 2004

TECHNOLOGY CENTER R3700

Transmitted herewith is an Amendment in the above-identified application.

Entitlement to small entity status is hereby asserted.  
 Small entity status of this application has been established.

The filing fee has been calculated as shown below:

|  | (Column 1)                                | (Column 2)                            | (Column 3)       |
|--|---|---------------------------------------|------------------|
|  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | HIGHEST NO.<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
| TOTAL CLAIMS   | *21 MINUS                                 | **20                                  | =1               |
| INDEP CLAIMS *6 MINUS  |   |                                       |                  |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM |   |                                       |                  |

| SMALL<br>ENTITY |              |
|-----------------|--------------|
| RATE            | ADD'L<br>FEE |
| x 9             | \$ 9         |
| x 43            | \$ 86        |
| + 145           | \$           |
|                 | \$ 95        |

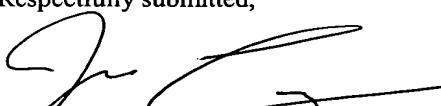
| OTHER THAN A<br>SMALL ENTITY |              |
|------------------------------|--------------|
| RATE                         | ADD'L<br>FEE |
| x 18                         | \$           |
| x 86                         | \$           |
| + 290                        | \$           |
|                              | \$           |

\* If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

Check No. 154785 in the amount of \$ 95.00 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

  
James A. Oliff  
Registration No. 27,075

Jesse O. Collier  
Registration No. 53,839

JAO:JOC/tea

Date: June 4, 2004